## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

10,629,467

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
<del></del>			(Column 1)		(Colur	(Column 2)		TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS 12								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE, CLAIMS			12 minus 20= *		* Ø			X\$ 9=	•	OR	X\$18=	v 1
INDEPENDENT CLAIMS					* 0			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	5
* If the difference in column 1 is less than zero, enter "0" in col						olumn 2	4	TOTAL		OR	TOTAL	750
CLAIMS AS AMENDED - PART II											OTHER	
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** .	_	= .		X\$ 9=		OR	X\$18=	.** 
	Independent	*	Minus ***  JLTIPLE DEPENDENT		CLAIM	=		X42=		OR	- X84=	
	THOTTHEOL	IVI/IVIOIV OF IVI	JEI3II EE DEI	LIVELIV	OLANIVI	·	7	+140=		OR	+280=	
								TOTAL		OR	TOTAL ADDIT. FEE	
ADDIT. FEEON ADDIT. FEEON ADDIT. FEEON ADDIT. FEEON ADDIT. FEEON ADDIT. FEE												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CHAIM	=		X42=		OR	X84=	
			JE) IF LE DEF	LINDLIN' CLAIN		. 1	Ţ	+140=		OR	+280=	
,	है। इ.स.							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)						*
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	!	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	E'OL AIN	=		X42=	i v	OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA						J	+140=	**	OR	+280=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OB	TOTAL	
***	If the "Highest Nu	mber Previously P ober Previously Pa	aid For" IN THI	S SPACE	is less tha	n 3, enter "3."		ADDIT. FEE I	propriate bo	l	ADDIT. FEE lumn 1.	